

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

19249 U.S. PTO  
10/628102  
07/25/03

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. <b>PC 23140A (121*399)</b>
		First Inventor <b>Michael W. Dunne</b>
		Title <b>SINGLE DOSE AZITHROMYCIN</b>
		Express Mail Label No. <b>EL878195037</b>

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>ADDRESS TO:</b> MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
--------------------------------------------------------------------------------------------------------------------	--	-----------------------------------------------------------------------------------------------------------------------

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or <input type="checkbox"/> Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small>	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>
3. <input checked="" type="checkbox"/> Specification <small>(preferred arrangement set forth below)</small> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed Sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure	9. <input type="checkbox"/> Computer Readable Form (CRF)
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <small>(Total Sheets 5 1)</small>	10. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper
5. Oath or Declaration <small>(Total Sheets 2 1)</small>	11. <input type="checkbox"/> Statements verifying identity of above copies
a. <input type="checkbox"/> Newly executed (original or copy)	12. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small>	13. <input type="checkbox"/> 37 CFR 3.73(b) Statement <small>(when there is an assignee)</small>
i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</small>	14. <input checked="" type="checkbox"/> Power of Attorney
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	15. <input type="checkbox"/> English Translation Document (if applicable)
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:	16. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449
<input checked="" type="checkbox"/> Continuation <small>Under 53(b)</small>	17. <input type="checkbox"/> Copies of IDS Citations
<input type="checkbox"/> Divisional	18. <input type="checkbox"/> Preliminary Amendment
<input type="checkbox"/> Continuation-in-part (CIP)	19. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>
	20. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>
	21. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). <small>Applicant must attach form PTO/SB/35 or its equivalent.</small>
	22. <input checked="" type="checkbox"/> Other: <b>3 month extension of time</b>

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

Continuation  Divisional  Continuation-in-part (CIP) of prior application No.: **10/224,903**

Prior application information: Examiner **Latonia M. Fisher** Art Unit: **1623**

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

<b>19. CORRESPONDENCE ADDRESS</b>			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label	<b>23416</b>		or <input type="checkbox"/> Correspondence address below
Name			
Address			
City	State	Zip Code	
Country	Telephone		Fax

Name (Print/Type)	<b>Christine M. Hansen</b>	Registration No. (Attorney/Agent)	<b>40,634</b>
Signature	<i>Christine M. Hansen</i>		Date <b>July 25, 2003</b>

19085 US PTO  
07/25/03

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2003

Effective 01/01/2003, Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 3372.00)

## Complete if Known

Application Number	53(b) continuation of 10/224903
Filing Date	August 21, 2002
First Named Inventor	Michael W. Dunne
Examiner Name	As to Parent: Latonia Fisher
Art Unit	As to Parent: 1623
Attorney Docket No.	PC 23140A (121*399)

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  Other  None

Deposit Account

Deposit Account Number 03-2775

Deposit Account Name Connolly Bove Lodge & Hutz LLP

The Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) during the pendency of this application  
 Charge fee(s) indicated below, except for the filing fee, to the above-identified deposit account.

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 410	2252 205	Extension for reply within second month	
1253 930	2253 465	Extension for reply within third month	
1254 1,450	2254 725	Extension for reply within fourth month	
1255 1,970	2255 985	Extension for reply within fifth month	
1401 320	2401 160	Notice of Appeal	
1402 320	2402 160	Filing a brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,300	2453 650	Petition to revive - unintentional	
1501 1,300	2501 650	Utility issue fee (or reissue)	
1502 470	2502 235	Design issue fee	
1503 630	2503 315	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 750	2809 375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 750	2810 375	For each additional invention to be examined (37 CFR 1.129(b))	
1801 750	2801 375	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

**SUBTOTAL (1) (\$ 750.00)**

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
147	-20** =	127 x 18	2286
7	-3** =	4 x 84	336

### Large Entity Small Entity

Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee Description
1202 18	2202 9		Claims in excess of 20
1201 84	2201 42		Independent claims in excess of 3
1203 280	2203 140		Multiple dependent claim, if not paid
1204 84	2204 42		** Reissue independent claims over original patent
1205 18	2205 9		** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2) (\$ 2622.00)**

\*\*or number previously paid, if greater; For Reissues, see above

\*Reduced by Basic Filing Fee Paid **SUBTOTAL (3) (\$**

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Christine M. Hansen	Registration No. (Attorney/Agent)	40,634	Telephone (302) 658-9141
Signature	Christine M. Hansen	Date	July 25, 2003	

## **Certificate of Express Mailing Under 37 CFR 1.10**

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EL878195037US in an envelope addressed to:

M.S. Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on

July 25, 2003

Date

Jean M. Marshall

Signature

Jean M. Marshall

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Specification (41 pages);  
Drawings (5 sheets);  
Combined Declaration/Power of Attorney (2 pages);  
Utility Patent Application Transmittal (1 page);  
Fee Transmittal (2);  
Information Disclosure Statement (2 pages);  
PTO/SB/08;  
Petition for Extension of Time under 37 CFR 1.136(a) (3 mo.);  
Checks totaling \$4302.00 (\$3372.00 and \$930.00); and  
Return Postcard.